



COMPRESSOR/INDUSTRIAL ENGINES
ANNUAL EMISSIONS INVENTORY REPORT
NORTH DAKOTA DEPARTMENT OF HEALTH
DIVISION OF AIR QUALITY
SFN 11829 (12-05) (AP-313)

GENERAL

Name of Firm or Organization		Year of Emissions	
Mailing Address	City	State	Zip Code
Facility Location	Permit to Operate Number	Source Unit Number	

EQUIPMENT INFORMATION

<input type="checkbox"/> Stationary Gas Turbine	<input type="checkbox"/> Reciprocating Engine <input type="checkbox"/> 2-Stroke Lean Burn	<input type="checkbox"/> Dual Fuel Engine	<input type="checkbox"/> Spark Ignition
<input type="checkbox"/> Stationary Large Bore Diesel	<input type="checkbox"/> 4-Stroke Lean Burn <input type="checkbox"/> 4-Stroke Rich Burn	<input type="checkbox"/> Other, Specify _____	<input type="checkbox"/> Compression Ignition
Manufacturer of Unit	Model Number	Hours of Operation (hrs/yr)	
Maximum Rating BHP at RPM	Design Capacity BHP at RPM		

FUELS USED

NATURAL GAS (if applicable)	Thousand Cu. Ft./Year	BTU/Cu. Ft.	Percent H ₂ S
DIESEL (if applicable)	Gallons/Year	BTU/Gal	
LP GAS (if applicable)	Gallons/Year	BTU/Gal	
OTHER (Specify)	Specify	BTU/Unit	

COMPRESSOR STATION FLARE STACK EMISSIONS

Quantity Flared Thousand CF/Yr	Average H ₂ S Content	SO ₂ Emissions Tons/Yr
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TOTAL STACK EMISSIONS

(USE THIS CHART FOR SINGLE FUEL USAGE. USE OTHER SIDE IF MULTIPLE FUELS ARE USED AND SUMMARIZE THE TOTAL TONS PER YEAR ON THIS CHART.)

Air Contaminant*	Emission Factor (Include Units)	Emission Factor Source (Include Test Date if Applicable)	Tons Per Year
Particulate - Total			
PM10 (Particulate < 10 microns)			
Sulfur Dioxide			
Nitrogen Oxides			
Carbon Monoxide			
Total Organic Compounds: Nonmethane			
Hazardous Air Pollutants	You must also submit SFN 19839 for Hazardous Air Pollutants (include formaldehyde and total hazardous air pollutant emissions.)		

I declare under the penalties of perjury that this report has been examined by me and to the best of my knowledge is a true, correct and complete report.

Print Name of Person Submitting Report	Title	
Signature	Telephone Number	Date

STACK EMISSIONS

FUEL TYPE:

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Particulate - Total			
PM10 (Particulate < 10 microns)			
Sulfur Dioxide			
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Carbon Monoxide			
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Provide calculations for quantities listed above. Use additional sheets if necessary.

Return completed form to:

NORTH DAKOTA DEPARTMENT OF HEALTH
DIVISION OF AIR QUALITY
918 E Divide, 2nd Floor
Bismarck, ND 58501-1947
Telephone: (701)328-5188